

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>09/1830894</i>	FILING DATE
						APPLICANT(S)	
CLAIMS							
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					51	
2	/					52	
3	/					53	
4	/					54	
5	/					55	
6	/					56	
7	/					57	
8	/					58	
9	/					59	
10	/					60	
11	/					61	
12	/					62	
13	/					63	
14	/					64	
15	/					65	
16	/					66	
17	/					67	
18	/					68	
19	/					69	
20	/					70	
21	/					71	
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25	/					75	
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28	/					78	
29	/					79	
30	/					80	
31	/					81	
32	/					82	
33	/					83	
34	/					84	
35	/					85	
36	/					86	
37	/					87	
38	/					88	
39	/					89	
40	/					90	
41	/					91	
42	/					92	
43	/					93	
44	/					94	
45	/					95	
46	/					96	
47	/					97	
48	/					98	
49	/					99	
50	/					100	
TOTAL IND.	<i>5</i>					TOTAL IND.	
TOTAL DEP.	<i>30</i>	↓	↓	↓		TOTAL DEP.	↓
TOTAL CLAIMS	<i>41</i>	PROPOSED	PROPOSED	PROPOSED		TOTAL CLAIMS	PROPOSED

PTO-1360 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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